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CONFIRMATION NO. 5991

<b>SERIAL NUMBER</b> 10/522,331	<b>FILING OR 371(c) DATE</b> 01/24/2005 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> REUL et al 1 PCT	
<b>APPLICANTS</b> Rudiger Autschbach, Aachen, GERMANY; Gjorgio Cattaneo, Aachen, GERMANY; Helmut Reul, Duren, GERMANY;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/DE03/02455 07/22/2003  <b>** FOREIGN APPLICATIONS *****</b> GERMANY 10233290.8 07/22/2002 GERMANY 110247629.2 10/11/2002  <div style="text-align: center;">** SMALL ENTITY **</div>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 88	<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> 25889					
<b>TITLE</b> Intravenous oxygenator					
<b>FILING FEE RECEIVED</b> 2550	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		